



PTO/SB/81 (09-03)

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| POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM | Application Number | 10/058,103 |
| | Filing Date | January 23, 2002 |
| | First Named Inventor | Lydia L Sohn |
| | Title | Method And Apparatus For Analysis of Biological Solutions |
| | Art Unit | 2858 |
| | Examiner Name | Donald M. Lair |
| | Attorney Docket Number | 022363-000310US |

I hereby appoint:

☒ Practitioners associated with the Customer Number **20350**

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

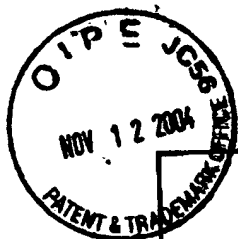
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | | | | | |
|-----------|---------------|--|-----------|--------------|--|
| Name | Omar A. Saleh | | | | |
| Signature | | | | | |
| Date | 10/28/04 | | Telephone | 732-966-3058 | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.



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Individual Name

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SIGNATURE of Applicant or Assignee of Record

Name Lydia L. Sohn

Signature

Date

Telephone

570-642-5434

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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